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PTO/SB/83 (03-02)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

| | |
|------------------------|------------|
| Application Number | 10/002,382 |
| Filing Date | 10/20/01 |
| First Named Inventor | MEMRAN |
| Group Art Unit | 1744 |
| Examiner Name | UNKNOWN |
| Attorney Docket Number | 765 |

To: Assistant Commissioner for Patents
Washington, DC 20231

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NOV 18 2002

I hereby apply to withdraw as attorney or agent for the above identified patent application.

Technology Center 2800

The reasons for this request are:

- 1) MR. MEMRAN IS REFUSING TO PAY THE BALANCE OF HIS BILL, AFTER BEING REMINDED NUMEROUS TIMES.
- 2) THE ENCLOSED INVOICE WAS FAXED TO MR. MEMRAN ON OCTOBER 23, 2002.
- 3) HE HAS NOT PAID ANY FUNDS SINCE OCTOBER 20, 2001

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

CORRESPONDENCE ADDRESS

☐ Customer Number

Place Customer Number
Bar Code Label here

OR

| | | | | | |
|---|---------------------|-------|----|-----|-------|
| <input checked="" type="checkbox"/> Firm or Individual Name | LOUIS I. MEMRAN | | | | |
| Address | 8331 N.W. 80 STREET | | | | |
| Address | | | | | |
| City | TAMARAC | State | FL | ZIP | 33321 |
| Country | USA | | | | |
| Telephone | 561-487-2899 | Fax | | | |

- ☐ This request is made on behalf of myself and
- ☒ all the attorneys/agents of record,
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☐ the attorneys/agents associated with Customer Number _____

This request is enclosed in triplicate (including any attachments).

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TC 1700

| | |
|-----------|--------------------|
| Name | DONALD J. ERSLER |
| Signature | <i>[Signature]</i> |
| Date | 11/4/02 |

NOTE: Withdrawal is effective when approved rather than when received.
Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Donald J. Ersler, ATTORNEY AT LAW
Patent, Trademark, and Copyright Law

INVOICE

Date: October 23, 2002

To: Louis I. Memran
8331 N.W. 80 Street
Tamarac, Florida 33321

For: Filing of patent application for "Utilizing Vacuum Tubes In Audio Circuitry."
(Patent Atty Fee: 7.0 hrs. x \$135.00/hr. = \$945.00; Patent Filing Fee: \$395.00)

If I do not receive at least \$100.00 in payment by November 1, 2002, I will withdraw from your case!

Total Fee..... \$1,340.00

Amount Tendered..... \$895.00

AMOUNT DUE..... \$445.00

Thank you for the opportunity to serve you.